andiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>DEC 24,2008</u>	Address:	CR 1100 East
Case #:	<u>13-73716</u>		Grovertown, IN
County: .	STARKE		(south of US 30)
Type of Laboratory Seizure (check one) ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Scizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents;			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s): <u>trash bag on side of road</u>			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes _ ⊠ No	or age 18 discovered (check one) (number present) port to Child Protective Services	☐ Ephedrin ☐ Retail/M	e Information c/Pseudoephedrine Tracking Log erchant Tip <u>UGHBOR</u>
This report is to be faxed to the following agencies that serve the location:			
Pire Departs	ment: <u>Kontz Lake</u>	Fax: <u>574-586-3333</u>	
Health Depa	artment: STARKE CO.	Fax: <u>574-7</u> Fax: <u>N/A</u>	72-8035
Child Proto	ction Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: SCOTT GILBERT Phone 219-696-6242			

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.